



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 4802

SERIAL NUMBER 10/633,612	FILING OR 371(c) DATE 08/01/2003 RULE	CLASS 433	GROUP ART UNIT 3732	ATTORNEY DOCKET NO. JPP-1230CIP3B
------------------------------------	---	---------------------	-------------------------------	---

APPLICANTS
 Ajit Karmaker, Wallingford, CT;
 Larry A. Lopez, Boerne, TX;
 Bruce Alpert, Madison, CT;
 Bruce A. Finnigan, Wallingford, CT;

**** CONTINUING DATA ******* *okay ceo*
 This application is a CIP of 10/164,512 06/06/2002 PAT 7,086,864 which is a CIP of 09/684,493
 10/06/2000 PAT 6,428,319
 which is a CIP of 09/571,040 05/12/2000 PAT 6,447,297
 which claims benefit of 60/133,733 05/12/1999

**** FOREIGN APPLICATIONS ******* *none ceo*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED SMALL ENTITY ****
 ** 10/30/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CT	SHEETS DRAWING 12	TOTAL CLAIMS 54	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met				
Verified and Acknowledged <i>Raymond</i> Examiner's Signature Initials				

ADDRESS
 Pentron Corporation
 53 North Plains Industrial Road
 Wallingford, CT06492

TITLE
 Endodontic post and obturating system

FILING FEE RECEIVED 788	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
-----------------------------------	---	---